

## Health Care Planning and Accountability Advisory Council Monday, December 9, 2013 10:30 a.m.

## Conference Room "A", Department of Administration Providence, Rhode Island

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*Co-Chairmen*: Steven Costantino, Secretary, Executive Office of Health & Human Services; Kathleen Hittner, MD, Health Insurance Commissioner

Attendees: Alyn Adrain, MD; Timothy Babineau, MD; Ken Belcher; Garry Bliss (for Dale Klaztker, Ph.D.); Jodi Bourque, Esq.; Al Charbonneau; Stephen DeToy; Stephen Farrell; Michael Fine, MD; Patricia Flanagan, MD; Marie Ganim, Ph.D.; Dennis Keefe; Eve Keenan, Ed.D, RN; Al Kurose, MD; Ed Quinlan; Corinne Calise Russo (for Sandra Powell, DHS); Craig Syata; Fox Wetle, Ph.D

*Regrets:* Peter Andruszkiewicz; Douglas Bennett; Nicki Cicogna; Robert Hartman; Jane Hayward; Gloria Hincapie; George Nee; Donna Policastro, RNP; Louis Rice, MD; Lynne Urbani

*Staff in Attendance*: Michael Dexter, Chief, Office of Health Systems Development, Department of Health; Kim Paull, Director of Analytics, Office of the Health Insurance Commissioner; Elizabeth Shelov, Chief, Family Health Systems, Executive Office of Health & Human Services

## Introduction

The Council meeting was convened promptly at 10:35 a.m. by *Dr. Kathleen Hittner*, Health Insurance Commissioner.

The minutes from the November 1, 2013 Council meeting were approved as written, with no additions or corrections.

Kim Paull, Director of Analytics at the Office of the Health Insurance Commissioner, did a brief overview of the status of the request for proposals (RFPs).

- The Cost of Care RFP has been posted for public bidding; final responses are due in two weeks. Once the contract is signed, the information about the prevailing vendor and the scope of work will be shared with the Council.
- The Behavioral Health/Substance Abuse RFP is being drafted, structural edits have been completed on a first draft. *Secretary Costantino* indicated that he wants children's behavioral health services included in the RFP. The RFP will focus upon behavioral health/substance abuse spending, demand, supply, and innovations in other geographical locations. The possibility of a Medicaid match will be determined before the RFP gets posted. The Council will be reconvened once both of the contracts have been signed, probably Spring 2014.

*Dr. Hittner* introduced the topic for today's meeting: HCA/CoN recommendations to the Rhode Island General Assembly.

*Secretary Costantino* questioned if the Council's obligations regarding the recommendations had been fulfilled. The recommendations were sent to the General Assembly in the Spring.<sup>1</sup> "Is it time to move on?" The General Assembly is reviewing these issues, with or without the recommendations.

At this point, the Secretary threw the meeting open for discussion.

*Mr. Keefe* indicated that he wants the group to get on with its other work.

*Dr. Babineau* asked, "What is the charge of the group?"

*Dr. Keenan* expressed concerned that the recommendations make their way to the correct committees and that it might be useful to re-send a letter to the General Assembly committees with the recommendations attached.

*Mr. Belcher* agreed that it is not useful to go through the recommendations again.

*Dr. Keenan* indicated that much work has been done on these issues. She supports not going through the issues again, but if the recommendations were sponsored in this session, it would be great.

Secretary Costantino: Should the recommendations be re-transmitted to the General Assembly?

*Dr. Keenan* asked that the group request a message back from General Assembly staff indicating what, if anything, will be done with the recommendations.

Attorney Bourque asked Council members to consider that if a letter goes and the HCA/CON statutes are re-examined, there may be unintended consequences.

*Dr. Keenan* moved for a vote, with a motion to send a letter and related recommendations back to the General Assembly, along with a request for feedback from Assembly staff.

Those members present who were in favor of the motion were as follows: Mr. Belcher; Mr. Bliss (for Dale Klaztker, Ph.D.); Mr. DeToy; Mr. Farrell; Dr. Fine; Dr. Flanagan; Mr. Keefe; Dr. Keenan; Mr. Quinlan; Ms. Calise Russo (for Sandra Powell, DHS); Mr. Syata; Dr. Wetle

There were four abstentions as follows: *Mr. Charbonneau*, *Attorney Bourque*, *Dr. Babineau*, and *Dr. Ganim*. Those opposed: *Drs. Adrain and Kurose*.

The discussion turned to a statewide health plan.

*Dr. Keenan* indicated that a presentation on other states' health plans would be useful. What might the plan look like?

It would be useful to review population health outcomes along with the state health plans.

<sup>&</sup>lt;sup>1</sup> These recommendations were formally transmitted to the Rhode Island General Assembly on May 7, 2013 and may be found online at:

 $<sup>\</sup>underline{http://www.health.ri.gov/materialbyothers/HealthCarePlanningAccountabilityAdvisoryCouncillReportToGeneralAssembly}.\underline{pdf}$ 

*Mr. Keefe:* What do we mean by a state health plan? There is none in Massachusetts. But, Massachusetts has CoN and other health planning programs.

*Dr. Wetle:* The Council has guiding principles and has a starting point. The Council needs more resources and staffing for its work.

Secretary Costantino read the purpose of the Council directly from section 23-81-4 of the Rhode Island General Laws, as amended. He suggested that the Council review a summary of state health plans, not an in-depth review of each plan, and focus on the ones that have meaning for the group.

*Dr. Wetle* would like to know more about the role of health planning in the states that have been awarded SIMS grants. Which of these states has a statewide health plan? Is there a ranking of health outcomes for these states?

Mr. Kurose noted that having a statewide health plan would be a useful reference point for decision-making.

A motion was made related to the review of state health plans. The vote was unanimous, with no abstentions.

## **Public Comment**

Vivian Weisman (formerly Executive Director at the Mental Health Association of Rhode Island) thanked the Council for including children in the mental health study.

Betsy Loucks (HealthRIght): In the last legislative session, HealthRIght submitted legislation to fund the Council with a \$1.25 million budget. (Bill was not enacted). She indicated that while it is important to know what other states do, this group has the knowledge and expertise to write an informed statewide health plan.

*Dr. Flanagan* questioned whether there is a health plan for children in Rhode Island. Would it be helpful to have other experts around the table? (e.g., child welfare, community agencies).

*Secretary Costantino* indicated that the statute provides for advisory sub-committees. If there are special areas/topics, a sub-committee could be convened.

With no further discussion, the meeting adjourned at 11:30 a.m.

Next meeting date/time: To be determined.

Notes prepared and respectfully submitted by:

Elizabeth Shelov, MPH/MSSW

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Chief, Family Health Systems

Executive Office of Health & Human Services

December 18, 2013